

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

10/030277

22 APR 2002

APPLICANT(S)

*See*

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/						51						
2		/					52						
3		/					53						
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47							97						
48							98						
49							99						
50							100						
TOTAL IND.	/						TOTAL IND.						
TOTAL DEP.	8						TOTAL DEP.						
TOTAL CLAIMS	9						TOTAL CLAIMS						